



Atty. Dkt. No. 053466-0296

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Tadimitsu KISHIMOTO, *et al.*
Title: CHRONIC RHEUMATOID ARTHRITIS THERAPY CONTAINING
IL-6 ANTAGONIST AS EFFECTIVE COMPONENT
Appl. No.: 09/756,125
Filing Date: 01/09/2001
Examiner: G. Ewoldt
Art Unit: 1644
Confirmation No.: 6506

**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD
OF PATENT APPEALS AND INTERFERENCES**

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Applicants hereby appeal to the Board of Patent Appeals and Interferences from the decision of the Examiner in the Final Office Action dated August 31, 2006, finally rejecting Claims 9, 11-14, 16 and 17.

☐ Applicant claims small entity status.

☒ Notice of Appeal Fee

☒ To be paid as detailed below

☐ Not required (Fee paid in prior appeal)

02/26/2007 JADD01 00000014 09756125
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The required fees are calculated below:

<input checked="" type="checkbox"/>	Notice of Appeal Fee	\$500.00
<input type="checkbox"/>	Extension:	\$0.00
	FEE TOTAL:	\$500.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):	\$0.00
	TOTAL FEE:	\$500.00

A credit card payment form in the amount of \$500.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

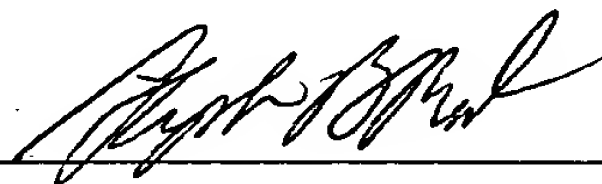
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

Feb. 23, 2007

By



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